Step 1. Assess Strengths and Needs of Service System

Overview of the State Mental Health System

Ongoing Adult MH & Disability System Redesign

Move to Regional system complete

Iowa Health and Wellness program implemented

Closed two mental health institutes

Implementation of inpatient bed tracking system

Move entire Medicaid population to managed care

Legislation to allow subacute beds to be used for involuntary hospitalization

Mental health advocate legislation

Olmstead Plan update for next 5 years

The State Mental Health Authority

- 2 resource centers Woodward and Glenwood
- 2 MHI's at Cherokee and Independence
- The Civil Commitment Unit for Sexual Offenders (violent sexual predators)
- Eldora State Training School-for juvenile males adjudicated delinquent
- The Office of Facility Support
- The Bureau of Targeted Case Management
- The Bureau of Community Services and Planning (provides oversight of the MHBG)

The Current Iowa Mental Health System

Iowa Plan – contract with Magellan – to change to managed care by end of year

County to Regional Services and Funding

Integrated Health Homes for Individuals with an SMI or SED

- 12.868 adults
- 10.916 children
- 39 IHH programs across the state

The Iowa Health and Wellness Plan – 133,056 served as of 6-30-15

Marketplace Choice plan closed down and enrollees transferred to Health and Wellness program

Strengths and Needs of Iowa's Mental Health System

1. Behavioral Health Prevention

- a. Education for the general public and providers
 - i. Iowa Mental Health conference
 - ii. Iowa Empowerment Conference
 - iii. Trauma Informed Care training
 - iv. NAMI signature programs
 - 1. Basics
 - 2. Family to Family
 - 3. Peer to Peer
 - 4. Provider
 - 5. Homefront
 - 6. Ending the Silence
 - 7. In Our Own Voice
 - 8. Parents and Teachers as Allies
 - 9. Connections support groups
 - 10. Family member support groups
 - 11. Smarts for Advocacy
 - 12. Say It Out Loud
 - 13. NAMI on Campus
 - 14. Other programming
 - v. MH First Aid 70 adult First Aid instructors, 116 Youth First Aid instructors
 - vi. Project AWARE Iowa
 - 1. Now is the Time State Education Agency grant 3 education agencies, 4 schools
 - 2. Now is the Time School Climate Transformation grant 6 grants
 - vii. Disaster Behavioral Health Response Training and Team Deployment

2. Early Intervention

- a. Early Access birth to age 3
- b. ACES
- c. 1st Five Healthy Mental Development 11 sites
- d. Parent Child Interaction Therapy provider training
- e. Iowa Association for Infant and Early Childhood Mental Health
- f. IDPH Suicide Prevention Efforts in 2013, 445 lost of which 26 were teens Received 2nd Garrett Lee Smith Youth Suicide prevention grant in 2013 – Y-YASP Youth and Young Adult Suicide Prevention Program
 - i. Screen all youth and young adults seeking substance use disorder treatment for suicide risk;
 - ii. Implement an evidence-based gatekeeper program for middle and high school educators in all Iowa's middle/junior high and high schools;
 - iii. Provide trauma-informed care and other evidence-based practice trainings for providers who work with those at risk of suicide and with co-occurring substance use and mental health disorders; and
 - iv. Promote suicide prevention resources through a social media campaign that targets youth and young adults.
- g. Iowa Suicide Prevention Planning Group and Plan
 - i. "Your Life Iowa" 24/7 hotline, texting services 2 PM to 10 PM 7 nights a week, and website
- h. PASRR Preadmission Screening and Resident Review 450 facilities

3. Treatment Services

- a. The Iowa Plan for Behavioral Health Care 685,000 Iowans eligible to change to Managed Care
- b. Mental Health and Substance Abuse Services Available Through the Iowa Plan to Medicaid Eligible Iowans children and adult unless designated otherwise 42,868 children, 60,771 adults served through Magellan
- c. IDPH substance use treatment
- d. Iowa Plan for Behavioral Health IDPH/SSA Substance Use Services
 - i. Key elements of IDPH Funded System of Care
 - ii. Core set of services
 - iii. Provider network 23 programs
 - iv. Client eligibility and performance measures
 - v. Co-occurring system initiatives and services
 - vi. Services for individuals with co-occurring issues
 - 1. Access to recovery (ATR) 3 year SAMHSA grant vouchers for services
 - 2. 425 residential treatment beds
 - 3. 2 PMICs for persons up to age 21 56 beds
 - 4. Of 27 CMHC's, 11 are SA providers
 - 5. 12 of 65 accredited MH providers are SA providers
 - vii. CHIP (Children's Health Insurance Program HAWK-I (Healthy & Well Kids in Iowa)
 - viii. Inpatient Psychiatric Care and Residential Care
 - 1. MHI's 64 adults, 32 children & adolescents, 15 PMIC beds
 - 2. Specialized Psychiatric Units in General Hospitals 27 hospitals, 656 beds
 - 3. Residential Care Facilities for Persons with Mental Illness (RCF/PMI) licensed by DIA, 11 facilities, 186 beds
 - 4. Intermediate Care Facilities for Persons with Mental Illness (ICF/PMI), licensed by DIA, 3 facilities, 109 beds
 - 5. Psychiatric Medical Institutions for Children (PMIC) 10 private facilities, 430 beds and 1 public facility with 15 beds. 56 of the private beds are for substance abuse treatment. 1010 kids received services in PMIC beds in FY 14.
 - ix. Case management services
 - x. Habilitation services 1951-I waiver
 - 1. Home based
 - 2. Day habilitation
 - 3. Vocational habilitation
 - 4. Supported Employment habilitation
 - xi. Educational System Services and Supports AEA's
 - xii. Services to Veterans VA facilities in Iowa City and Des Moines

- xiii. Services to Homeless Individuals
 - 1. PATH program
 - 2. Iowa Council on Homelessness at Iowa Housing Authority
 - 3. Local public housing authorities
- xiv. S.O.A.R. SSI/SSDI Outreach, Access and Recovery intensive assistance in applying for social security benefits who are homeless or at risk of homelessness or disabled
- xv. Housing supports HUD Section 8 housing assistance vouchers
- xvi. Home and Community Based Services Waiver Rent Subsidy Program through waiver programs
- xvii. Supported Employment/Employment Services
- xviii. Providers of Mental Health Services
 - 1. Community MH Centers (27) and Other MH Services Providers (65)
 - 2. Federally Qualified Health Centers 44 reimbursed at actual cost incurred
 - 3. Mental health Professionals Statewide
 - a. 237 psychiatrists of which 35 are child psychiatrists
 - b. 564 licensed psychologists
 - c. 150 psychiatric ARNP's
 - d. 20 physician assistants with a mental health specialty
 - e. 4150 social workers (independent, bachelor's and master's level)
 - f. 186 licensed marital and family therapists
 - g. 831 licensed mental health counselors
 - 4. Mental Health Shortage Area Designation 96 of 99 Iowa counties
 - x. Children's Mental Health Service System
 - 1. Systems of Care
 - 2. Services to Youth Aging Out of Foster Care/Transition Age Youth
 - xi. Behavioral Health Intervention Services (BHIS) interventions to improve level of functioning
 - 1. individual, group, and family skill building services
 - 2. crisis intervention services, and
 - 3. services to children in residential settings.
 - 4. provided in the home, school, and community, as well as foster family and group care settings.
 - xii. Children's Mental Health Waiver current capacity is 1237 takes 3 years to access services
 - xiii. Systems of Care
 - 5. Central Iowa System of Care 67 children
 - 6. Community Circle of Care -700 children
 - 7. Four Oaks System of Care 43 children
 - 8. Tanager Place 23 children
 - ix. Services to Youth Aging out of foster care/transition age youth
 - 9. Independent/Aftercare/PALS

4. Recovery Support Services

- a. Peer Support Services
 - i. Contract with U. of Iowa Center
- b. Supported Community Living Programs 90 programs
- c. Illness Management Recovery (IMR)
- d. Intensive Psychiatric Rehabilitation
- e. Respite
- f. Wellness Recovery Action Plan
- g. Consumer Organizations
 - i. Office of Consumer Affairs
 - ii. Iowa Advocates for Mental Health Recovery (IAMHR)
 - iii. Depression and Bipolar Support Alliance (DBSA)
 - iv. National Alliance on Mental Illness (NAMI)
 - 1. NAMI Iowa Children's Mental Health Committee
 - a. NAMI Iowa Children's Casserole Club
 - b. The Coalition for a Children's Mental Health System Redesign
 - v. Iowa Federation of Families for Children's Mental Health
 - vi. Access for Special Kids (ASK) Resource Center
 - vii. Parent Training and Information Center of Iowa (PTI)

- h. Iowa Dept. of Aging
- i. ADRC Aging and Disability and Resource Centers

STEP 2: Identify the unmet service needs and critical gaps within the current system

Identified Needs and Gaps within the current system

- Children With Serious Emotional Disturbance Identified needs:
 - 40,138 estimated to meet criteria for SED
 - o 2% served by children's MH waiver
 - o 3% served by systems of care
 - o Integrated health homes implemented for children with SED who are Medicaid eligible
 - o 10,916 enrolled in IHH out of 42,868 Medicaid eligible
 - <u>Issues identified</u>: lack of trained providers, lack of recreational activities for children with disabilities, a need for therapeutic school settings, lack of services for children with multi-occurring conditions such as mental illness and autism as barriers to children with an SED being able to live successfully in the community
 - legislatively mandated children's mental health and wellbeing workgroup will convene in the fall of 2015 to address coordination of children's mental health services across state systems as well as to address development of a children's mental health crisis response system.
- Crisis service system for children and adults have identified lack of crisis service as a gap across most of lowa and a reason that lowans seek inpatient psychiatric care, sometimes for lack of any other option when experiencing a crisis.

	Available prior	Available as	In
	to 7-1-14	of 7-1-14	Development
Jail Diversion (# of counties)	14	27	28
Mobile Crisis Response (# of counties)	5	16	11
Residential Crisis Beds	30	57	40
24 hour crisis line	0	6	1

- Adult peer support services, Family peer support services
- Other needs identified by Planning Council members include:
 - Housing supports for persons with mental illness-especially for people who cannot qualify for public housing subsidies due to criminal history
 - Mental health workforce shortage-especially psychiatrists as well as other prescribers, and licensed mental health professionals.
 - o Increased mental health training for law enforcement professionals and first responders
 - Increase access to Youth Mental Health First Aid training in schools and to law enforcement personnel who
 interact with youth as well as youth themselves
 - Increase mental health training for offenders involved in domestic violence and sexual abuse cases
 - Strengthen opportunities for early intervention by offering training through a variety of formats to pediatricians and family practitioners to promote early identification and intervention of mental health issues in children
 - Strengthen role of Office of Consumer Affairs
 - o Increase capacity of the system to provide mental health services for Veterans

From this list lowa identifies 3 priorities that align with state goals for redesign of the mental health system, current state initiatives, and priorities of the MHBG.

STEP 3 - Priorities

Priority 1: Children's Mental Health Services and Supports

Improve the system of care for children with mental health needs and their families by improving interdepartmental coordination of children's mental health services and creation of a plan for children's mental health crisis services.

<u>Priority 2</u>: <u>Peer support services</u> - To increase access to quality peer support services through increased training opportunities for persons wishing to become certified peer support and family peer support specialists.

<u>Indicator#1:</u> Shall train a minimum of 60 individuals to provide Peer Support Specialist services as part of an IHH care coordination team, and a minimum of 50 individuals to provide Peer Support Specialist services within a Provider agency. <u>Indicator#2</u>: Shall train a minimum of 50 individuals to provide Family Support Peer Services as a part of an IHH care coordination team, and a minimum of 40 individuals to provide Family Support Peer Services.

<u>Priority 3: Development of crisis services -</u> # of regions with a functioning mobile crisis team

Total of 5 regions by FY 16 Total of 6 regions by FY 17